

## Public Health Committee March 3, 2008 American Cancer Society Testimony

## SB 459 —An Act Promoting the Early Detection, Diagnosis and Treatment of Lung Cancer, Breast Cancer and Colon Cancer.

## Good Morning.

My name is Dr. Andrew Salner, and I am pleased and privileged to serve as the Chair, Connecticut Cancer Partnership, a coalition of some 300 volunteer individuals and organizations focused on planning and implementation of a comprehensive cancer control plan to decrease the burden of cancer on CT residents. The CT Cancer Partnership is the entity recognized by the US Centers for Disease Control and Prevention, or CDC, to partner with CT's Department of Public health on this important project. In my day job, I am a practicing oncologist and Director of the Helen & Harry Gray Cancer Center at Hartford Hospital.

Founded by the American Cancer Society, the CT Department of Public Health, the Connecticut State Medical Society, University of Connecticut Health Center and Yale Cancer Center in 2002, the Connecticut Cancer Partnership was created to develop a statewide comprehensive cancer program to assess the burden of cancer, set priorities, and formulate and carry out a plan for our state.

The Partnership has grown to include more than 300 individuals with an expertise in cancer, representing hospitals, community organizations, health agencies, universities, and companies from both the public and private sectors.

This multi-year, multi-strategy approach to cancer prevention and control encompasses all cancers and phases of cancer care from prevention and early detection to treatment to survivorship and end of life care.

In Connecticut, cancer is the leading cause of death for people 45-74 years of age and the leading cause of premature death for all ages combined. Its estimated economic cost exceeds \$1.3 billion annually.

Despite progress along many fronts in the fight against cancer, this year in Connecticut it will claim the lives of close to 7,000 people, and nearly 20,000 new cases will be diagnosed. We believe At least half of all cancers could be prevented or delayed if current knowledge about causes and risk factors were put into practice.

For complex reasons, cancer does not affect all groups equally. In the U.S. and Connecticut, men are more likely than women to develop and die from cancer, and conspicuous disparities exist

among different racial and ethnic groups, with African Americans having the highest cancer rates overall.

Initial implementation of the CCP began in 2006, which enabled a priority-based rollout of a number of programs and initiatives called for in the plan. These included:

- Expanding the state tobacco Quitline to include additional counseling and Nicotine Replacement Therapy (NRT).
- Expansion of the Connecticut Breast and Cervical Cancer Early Detection Program for enhanced screening and diagnostic services for un/underinsured women.
- Creation of a needs assessment of survivors, and centralized clearinghouse of survivorship resources.
- Enhancement undergraduate and post graduate training for end-of-life issues and care
- Creation of a colorectal cancer screening for 600 underserved adults in community
  that will soon be implemented, and a statewide network making cancer clinical trials
  more available to CT patients.

SB 459 – An Act Promoting the Early Detection, Diagnosis and Treatment of Lung Cancer, Breast Cancer and Colon Cancer is the first step in the next phase of implementation of the CT Cancer Partnership, and we urge your strong support.

We have presented the DPH, the Governor and legislature with a selected list of priorities, which would make the largest impact in the fight against cancer in the next two years. These are based on evidence created by other states, the CDC or others.

These priorities include programs and initiatives directed at Prevention, Early Detection, Treatment, Survivorship, End of Life Care and Disparities. Our proposal suggests that about 70% of these projects are focused on prevention and early detection, but we feel it is important to include treatment, survivorship, and end of life care since CT patients need our help in these areas as well.

## Specific programs include:

- Tobacco cessation including nicotine replacement therapy, and countermarketing.
- Further expansion to the Breast and Cervical Cancer Screening Program to be able to reach even more women.
- A lung cancer pilot program.
- Access to care initiatives
- A disparities needs assessment and strategy pilot.
- And much more, details of which are available to you as a supporting document at today's hearing.

The ongoing implementation of the *Comprehensive Cancer Plan* will go a long way toward fulfilling State government's fundamental responsibility to ensure Connecticut residents access to the quality cancer care we need and deserve.

We are appreciative of the efforts and collaboration of Dr. J. Robert Galvin, CT's Commissioner of Public Health, and his excellent staff, for their tireless efforts in working with our coalition to move these programs forward.

We thank Senator Handley, Representative Sayers, Senator Williams, and Speaker Amann for their leadership and vision in focusing efforts on improving the health of CT residents.

Please support SB 459

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